

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re the Application of:

KENJI TOBE

Application No.: 10/644,495

Filed: August 19, 2003

For: PLATE CHANGING APPARATUS

Art Group:

Examiner:

INFORMATION DISCLOSURE STATEMENT UNDER 37 C.F.R. §1.97

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

In accordance with the duty of disclosure, enclosed is a copy of Information Disclosure Statement by Applicant (form PTO/SB/08), which is being submitted before the mailing of a first Office Action. It is respectfully requested that the cited references be considered and that the enclosed copy of PTO/SB/08 be initialed by the Examiner to indicate such consideration and a copy thereof returned to applicant(s). Copies of the references cited on PTO/SB/08 are enclosed herewith.

It is hereby stated that no item of information contained in the Information Disclosure Statement was cited in a patent office in a counterpart application, and, to the knowledge of the undersigned, after making reasonable inquiry, no item of information contained in the Information Disclosure Statement was known to any individual associated with the filing or prosecution of the subject application more than three months prior to the filing of the Information Disclosure Statement.

The references were cited in a Search Report dated November 19, 2003 (copy enclosed herewith) in a counterpart EPO application, which was forwarded to Applicant's Representative in a communication dated December 9, 2003.

The submission of this Information Disclosure Statement is not to be construed as a representation that a search has been made in the subject application and is not to be construed as an admission that the information cited in this statement is material to patentability.

Please charge any fees due to Deposit Account 02-2666. A duplicate copy of the Fee Transmittal (PTO/SB/17) is enclosed for this purpose.

		Respectfully submitted,	
Date:	1/23/04	BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP Eric S. Hyman, Reg. No. 30,139	

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12400 Wilshire Boulevard, 7th Floor Los Angeles, CA 90025 Telephone: (310) 207-3800

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Melissa Stead Date

JAN 29 2004 Su

Substitute for form 1449A/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

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Complete if Known					
Application Number	10/644,495				
Filing Date	August 19, 2003				
First Named Inventor	Kenji Tobe				
Art Unit					
Examiner Name					
Attorney Docket Number	96790P436				

U.S. PATENT DOCUMENTS							
Examiner Initials*	Cite No.1	Document Number Number - Kind Code ² (if known)	Publication Date or Issue Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear		
		US-5595119	01-21-1997	Hada et al.			
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FOREIGN PATENT DOCUMENTS								
Examiner Cite No.1	Foreign Patent Document	D 15 - 5 - 6 - 1		Pages, Columns, Lines,	т6			
	Country Code ³ - Number ⁴ - Kind Code ⁵ (if known)		Name of Patentee or Applicant of Cited Document	Where Relevant Passages or Relevant Figures Appear	١٠			
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Examiner	Date	
Signature	Considered	

Based on PTO/SB/08A (08-03) as modified by Blakely, Solokoff, Taylor & Zafman (wir) 08/11/2003.

^{*}Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication.

¹Applicant's unique citation designation number (optional). ²See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴For Japanese patent documents, the indication of the year of reign of the Emperor must precede the serial number of the patent document. ⁵Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁶Applicant is to place a check mark here if English language Translation is attached.

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)			Application No.	14,495			
			Filing Date	Augu	August 19, 2003		
			First Named Inventor	Kenji	Kenji Tobe		
			Art Unit				
			Examiner Name				
Total Number of F	Pages in This Submissio	n 10	Attomey Docket Numbe	9679	0P436		
	ENCLO	SURES (chec	k all that apply)		·		
Fee Transmittal	Form	Drawing(s)			After Allowance Communication to Group		
Fee Attach	ned	Licensing-related Papers			Appeal Communication to Board of Appeals and Interferences		
Amendment / Re	sponse	Petition			Appeal Communication to Group (Appeal Notice, Brief, Repty Brief)		
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Extension of Tim	e Request	Power of At Change of 0	torney, Revocation Correspondence Address		. Status Letter		
Express Abandon	nment Request	Terminal D	isclaimer		Other Enclosure(s) (please identify below):		
Information Discl	osure Statement	Request for	Refund		PO Search Report; Prior art References (2); return		
PTO/SB/08		CD, Number of CD(s)			ostcard		
Certified Copy of Priority Document(s)							
Response to Mis	cation	Remarks					
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Response Parts und 1.52 or 1.5	e to Missing er 37 CFR 33						
	SIGNATURI	E OF APPLICAN	T, ATTORNEY, OR A	GENT			
Firm or	Eric S. Hyman	, Reg. No. 30,	139				
Individual name BLAKELY, SOKOLOF			TAYLOR & ZAI	MAN I	LLP		
Signature			Ag				
Date //2 3/64							
CERTIFICATE OF MAILING/TRANSMISSION							
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Signature	Weliss	teel	,	1-23-04			

FEE TRANSMITTAL for FY 2003 Complete if Known Application Number 10/644,495 Filing Date August 19, 2003 Kenji Tobe Effective 01/01/2003. Patent fees are subject to annual revision. First Named Inventor **Examiner Name** Applicant claims small entity status. See 37 CFR 1.27. Group/Art Unit **TOTAL AMOUNT OF PAYMENT** (\$) Attomey Docket No. 96790P436

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)							
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Deposit Account Number 02-2666						eDescription		FeePaid
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Account Name Blakely, Sokoloff, Taylor & Zafman LLP					cover sheet.			
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The Commissioner Is authorized to: (check all that apply) ✓ Charge fee(s) indicated below	1804	920 *	1804	920	* Requesting publication	•	idsoi!	
					Examiner action			
Charge any additional fee(s) required under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.	1805	1,840 *	1805	1,840	* Requesting publication Examiner action	on of SIR after		
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account	1251	110	2251	55	Extension for reply wi	thin first month		
FEE CALCULATION	1252	420	2252	210	Extension for reply wi	thin second month		
1. BASIC FILING FEE	1253	960	2253	475	Extension for reply wi	thin third month		
Large Entity Small Entity	1254	1,480	2254	740	Extension for reply wi	thin fourth month		
Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1255	1,210	2255	605	Extension for reply wi	thin fifth month		
1001 770 2001 385 Utility filing fee	1404	330	2401	165	Notice of Appeal			
1002 340 2002 170 Design filing fee	1402	330	2402	165	Filing a brief in suppo	rt of an appeal		
1003 530 2003 265 Plant filing fee	1403	290	2403	145	Request for oral hear	=		
1004 770 2004 385 Reissue filing fee	1451	1,510	2451	1,510	Petition to institute a	•	ing	ļ
1005 160 2005 80 Provisional filing fee	1452	110 1,330	2452	55 665	Petition to revive - un			<u> </u>
SUBTOTAL (1) (\$)	1453 1501	1,330	2453	665	Petition to revive - uni Utility issue fee (or re			
2. EXTRA CLAIM FEES Extra Fee from	1502	480	2502	240	Design issue fee	10000)		
Claims below FeePaid	1503	640	2503	320	Plant issue fee			
Total Claims - 20 = X	1460	130	2460	130	Petitions to the Comm	nissioner		·
Independent 3 = X	1807	50	1807	50	Processing fee under	37 CFR 1.17(q)		
Multiple Dependent	1806	180	1806	180	Submission of Inform	ation Disclosure S	tmt	
Large Entity Small Entity	8021	40	8021	40	Recording each pater property (times numb			
Fee Fee Fee Fee <u>Fee Description</u> Code (\$) Code (\$)	4000	770	4000	385	Filing a submission af	, , ,		<u></u>
1202 18 2202 9 Claims in excess of 20	1809	,,,,	1809	500	(37 CFR § 1.129(a))			
1201 86 2201 43 Independent claims in excess of 3	1810	770	2810	385	For each additional invexamined (37 CFR §			
1203 290 2203 145 Multiple Dependent claim, if not paid	1801	770	2801	385	Request for Continued		E)	
1204 86 2204 43 **Reissue independent claims over original patent	1802	900	1802	900	Request for expedited	•	-,	
1205 18 2205 9 **Reissue claims in excess of 20 and over		e (specify)		320	of a design application			
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SUBTOTAL (2) (\$)	* Reducer	d by Basic F	ilina Fee	Paid	,	SUBTOTAL (3)	(\$)	
**or number previously paid, if greater, For Reissues, see below			g. 00			30B101AE (3)	(4)	
SUBMITTED BY						Comp	plete (if applica	ible)
Name (Print/Type) Eric S. Hyman		egistratio tomey/Age		3	30,139	Telephone	(310) 20	7-3800
Signature Conf	*					Date	1/2/0	4